

CLAIMS ONLY							Application Number <b>09/778919</b>		Filing Date		
							Applicant(s)				
<b>01-26-05</b>											
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments				
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend
1			/				51				
2				/			52				
3			/				53				
4				/			54				
5				/			55				
6				/			56				
7				/			57				
8				/			58				
9				/			59				
10				/			60				
11				/			61				
12				/			62				
13				/			63				
14			/				64				
15			/				65				
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41							91				
42							92				
43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep			4				Total Indep				
Total Depend			11				Total Depend				
Total Claims			15				Total Claims				